PAGE 1 / 15

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Than A	An Authorized Committee	Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
College of American	Pathologists Pol	itical Action Committee	
ADDRESS (number and street)  Check if different	Suite 425 West		
than previously reported. (ACC)	Washington		DC 20001 -
2. FEC IDENTIFICATION	NUMBER ▼	CITY ▲	STATE ▲ ZIP CODE ▲
C C00274944		3. IS THIS REPORT NEW (N) OR	AMENDED (A)
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2) May 20 (M5)  Mar 20 (M3) Jun 20 (M6)  Apr 20 (M4) Jul 20 (M7)	(Non-Election Year Only)
April 15 Quarterly Repor July 15 Quarterly Repor October 15 Quarterly Repor January 31	t (Q2) (C) 12-Day PRE-Ele Report f		General (12G) Runoff (12R)  Special (12S)  in the
Year-End Report July 31 Mid-Yea Report (Non-ele Year Only) (MY) Termination Rep (TER)	(d) 30-Day POST-E Report f	` '	State of  Runoff (30R)  Special (30S)  in the State of
5. Covering Period	09 01 Y	2016 through 09	
I certify that I have examined	Misialek, Michael,	e best of my knowledge and belief it is t , John, Dr.	rue, correct and complete.
Signature of Treasurer	fisialek, Michael, , John, Dr	[Electronically Filed]	Date 10 / 18 / 2016
NOTE: Submission of false, er	roneous, or incomplete in	nformation may subject the person signing	this Report to the penalties of 52 U.S.C. § 30109
Office Use Only			FEC FORM 3X Rev. 05/2016

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### College of American Pathologists Political Action Committee

Report Covering the Period: From: 09 01 2016 To: 09 30 2016

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		486810.44
	(b) Cash on Hand at Beginning of Reporting Period	510782.24	
	(c) Total Receipts (from Line 19)	12801.00	182288.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	523583.24	669098.44
7.	Total Disbursements (from Line 31)	16600.90	162116.10
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	506982.34	506982.34
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

### College of American Pathologists Political Action Committee

R	eport Covering the Period: From:	/ 01 / 2016 To:	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees	<u>'</u>					
	(i) Itemized (use Schedule A)	10700.00	158560.00				
	(ii) Unitemized	2101.00	23728.00				
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	12801.00	182288.00				
	(b) Political Party Committees (c) Other Political Committees	0.00	0.00				
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00				
10	11(a)(iii), (b), and (c)) (Carry  Totals to Line 33, page 5)  Transfers From Affiliated/Other	12801.00	182288.00				
12.	Party Committees	0.00	0.00				
13.	All Loans Received	0.00	0.00				
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00				
16.	(Carry Totals to Line 37, page 5)	0.00	0.00				
17	Political Committees  Other Federal Receipts	0.00	0.00				
	(Dividends, Interest, etc.)  Transfers from Non-Federal and Levin Funds  (a) Non-Federal Account	0.00	0.00				
	(from Schedule H3)	0.00	0.00				
	(b) Levin Funds (from Schedule H5)	0.00	0.00				
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	12801.00	182288.00				
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	12801.00	182288.00				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B			
Operating Expenditures:	iotai iiiis reiiou	Calendar Year-to-Date			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)					
(i) Federal Share	0.00	0.00			
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating	100.00	906.10			
Expenditures	100.90	900.10			
(c) Total Operating Expenditures	100.90	906.10			
(add 21(a)(i), (a)(ii), and (b))▶  Transfers to Affiliated/Other Party	100.90	300.10			
Committees	0.00	0.00			
Contributions to	4 4				
Federal Candidates/Committees and Other Political Committees	16500.00	160710.00			
Independent Expenditures					
(use Schedule E)	0.00	0.00			
(52 U.S.C. § 30116(d))					
(use Schedule F)	0.00	0.00			
Loop Donovmente Made	0.00				
Loan Repayments Made	0.00	0.00			
Loans Made	0.00	0.00			
Refunds of Contributions To:	0.00	0.00			
(a) Individuals/Persons Other Than Political Committees	0.00	500.00			
	0.00	300.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees	4 4				
(such as PACs)	0.00	0.00			
(d) Total Contribution Refunds		4 4			
(add Lines 28(a), (b), and (c))	0.00	500.00			
Other Disbursements (Including					
Non-Federal Donations)	0.00	0.00			
Total Foundation Junior 10	0.00	3.00			
Federal Election Activity (52 U.S.C. § 30101(20	0))				
(a) Allocated Federal Election Activity					
(from Schedule H6)					
(i) Federal Share	0.00	0.00			
(ii) III ovinii Chara					
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00			
(b) Federal Election Activity Paid Entirely With Federal Funds	2.00	200			
(c) Total Federal Election Activity (add	0.00	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00			
	0.00	0.00			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	16600.90	162116.10			
	1000.00	4 152116116			
Total Federal Disbursements					
(subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	16600.90	162116.10			

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	12801.00	182288.00
4. Total Contribution Refunds (from Line 28(d))	0.00	500.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12801.00	181788.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	100.90	906.10
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	100.90	906.10

Use separate schedule(s)

FOR LINE NUMBER:					PAGE	6	OF	15	
(check only one)									
	X	11a		11b		11c	12	!	
		13		14		15	16	;	17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Almanza Sr, Othon, , Dr., MD Date of Receipt Mailing Address 1150 N 18th St Ste 102 19 2016 City Zip Code State Transaction ID: SA11AI.54343 TX Abilene 79601-2931 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Clinical Pathology Associates Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Deck, Michael, A., Dr., MD Date of Receipt Mailing Address 7020 Brook Forest Cir 09 2016 City State Zip Code Transaction ID: SA11AI.54339 TX Plano 75024-7535 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Michael A Deck MD PA Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Devine, Patricia, A, Dr., MD Date of Receipt Mailing Address 15 Lincoln St 342 2016 City State Zip Code Transaction ID: SA11AI.54383 MA Wakefield 01880-3001 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Oxford Immunotec Inc dba Imugen Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 3300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

TOTAL This Period (last page this line number only).....

Use separate schedule(s)

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Feran, Marianne, L., Dr., MD Date of Receipt Mailing Address 23 Whittier St 2016 City Zip Code State Transaction ID: SA11AI.54392 MA Melrose 02176-3601 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hallmark Hlth Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Haas, Thomas, S., Dr., DO Date of Receipt Mailing Address Department of Pathology 2016 1000 Mineral Point Ave City State Zip Code Transaction ID: SA11AI.54389 WI Janesville 53548-2940 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mercy Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hebert, Michelle, M, Dr., MD Date of Receipt Mailing Address 914 Elkins Lake 23 2016 1912 Rollingwood Dr City State Zip Code Transaction ID: SA11AI.54354 TX Huntsville 77340-8803 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Unaffiliated Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s)

FOR LINE NUMBER:					:	PAGE		8	OF	15
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		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hunt, Jennifer, L, Dr., MD Date of Receipt Mailing Address 4301 W Markham Slot 517 2016 City Zip Code State Transaction ID: SA11AI.54348 AR Little Rock 72205 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Arkansas for Medical Sci Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jensen, Bradden, W, Dr., MD Date of Receipt Mailing Address 2449 NW 15th CIR 09 2016 City State Zip Code Transaction ID: SA11AI.54337 WA Camas 98607-9389 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Unaffiliated Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Levegue, Christopher, M, Dr., MD Date of Receipt Mailing Address 102 Chester Dr 2016 City Zip Code State Transaction ID: SA11AI.54368 TX Friendswood 77546-4300 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Methodist Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	Ξ	I	,	I	Ξ	,		10	50.00	)	
TOTAL This Period (last page this line number only)	_	_	Ţ	Ξ	_	7	_	_	-40	_	

Use separate schedule(s)

FOR LINE NUMBER:				PAGE	9	OF	15			
(check only one)										
		X	11a		11b		11c	12	!	
			13		14		15	16	;	17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name O'Neill, Dennis, G, Dr., MD Date of Receipt Mailing Address Path Dept 1st FI 71 Haynes St 2016 City Zip Code State Transaction ID: SA11AI.54344 CT Manchester 06040-4188 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Manchester Memorial Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Powell, Suzanne, Zein-Eldin, Dr., MD Date of Receipt Mailing Address 5305 Southampton EST 09 2016 City State Zip Code Transaction ID: SA11AI.54361 TX Houston 77005-1778 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Houston Methodist Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Schwartz, Jared, N, Dr., MD, PhD Date of Receipt Mailing Address 453 Fenton Place 2016 City Zip Code State Transaction ID: SA11AI.54379 NC Charlotte 28207 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Unafilliated Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) 3750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

15 FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Taylor, Ann, , Dr., MD Date of Receipt Mailing Address Dept of Path 8th Ave & C St 2016 City Zip Code State Transaction ID: SA11AI.54365 UT Salt Lake City 84143-0001 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LDS Hospital Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Warner, Nancy, E., Dr., MD Date of Receipt Mailing Address 1065 S San Rafael Ave 2016 City State Zip Code Transaction ID: SA11AI.54381 CA Pasadena 91105-2330 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **USC Norris Cancer Hosp** Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Welsh, Terry, M, Dr., MD Date of Receipt Mailing Address 3086 Ceylon Rd 2016 City State Zip Code Transaction ID: SA11AI.54351 CA Costa Mesa 92626-2306 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Anaheim Regional Med Ctr Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 800.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

15

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wilkinson, David, S, Dr., MD, PhD Date of Receipt Mailing Address Sanger Hall S4-011 1101 E Marshall St # 980662 2016 City Zip Code State Transaction ID: SA11AI.54369 VA Richmond 23298-5048 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VCU Health System Authority Pathologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 10700.00 TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 12 OF 15					
ITEMIZED DISBURSEMENTS		arate schedule(s)	1	only one)				
		category of the Summary Page		21b 22 23 26 27				
	201404			28a 28b 28c 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the national state.								
NAME OF COMMITTEE (In Full)								
College of American Pathologists	Political	Action Com	mittee					
Full Name (Last, First, Middle Initial)				5. (5.)				
A. Sun Trust Bank				Date of Disbursement				
Mailing Address P.O. Box 85024				09 21 2016				
City Richmond	State VA	Zip Code 23285		FEC Identification Number				
Purpose of Disbursement Suntrust Account Analysis Fee				C				
Candidate Name				Transaction ID : SB21B.54319				
			Category Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse	ment For:			59.00				
Senate President	Primary	General						
State: District:	Other (spe	City) $\blacktriangledown$		Memo Item				
Full Name (Last, First, Middle Initial)								
В.				Date of Disbursement				
Mailing Address				M = M / D = D / Y = Y = Y				
Mailing Address	maining / tearsoos							
City	State	Zip Code		FEC Identification Number				
Purpose of Disbursement				C				
Candidate Name			Category	Amount of Each Disbursement this Period				
Office Sought: House Disburse	ment For:		Type					
Senate	Primary	General		7 7 7				
President	Other (spe	cify)		Memo Item				
State: District:  Full Name (Last, First, Middle Initial)								
C.				Date of Disbursement				
Mailing Address				M M / D D / Y Y Y Y				
Mailing Address								
City	State	Zip Code		FEC Identification Number				
Purpose of Disbursement				C				
Candidate Name								
			Category Type	Amount of Each Disbursement this Period				
	ment For:							
Senate President	Primary Other (spe	General Cify) ▼						
State: District:	1 (550	- <i>31</i> •		Memo Item				
				59.00				
SUBTOTAL of Disbursements This Page (optional).				55.00				
TOTAL This Period (last page this line number only	')			59.00				

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 28a			
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  College of American Pathologists P	e and address of any politica	I committee to			
Full Name (Last, First, Middle Initial)  A. ANDY HARRIS FOR CONGRESS  Mailing Address PO BOX 604			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
BEL AIR Purpose of Disbursement  Candidate Name  Office Sought:     March   Ma	State Zip Code 21014  ment For: 2016 Primary General Other (specify)	Category/ Type	FEC Identification Number  C C00435974  Transaction ID: SB23.54320  Amount of Each Disbursement this Period  1000.00  Memo Item		
ORLANDO Purpose of Disbursement	State Zip Code FL 32801		Date of Disbursement  M M / D D / Y Y Y Y  09 16 2016  FEC Identification Number  C C00581074  Transaction ID: SB23.54321		
Senate	nent For: 2016 Primary 🗶 General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 2500.00  Memo Item		
Full Name (Last, First, Middle Initial)  C. FRIENDS OF RAJA FOR CONGRE  Mailing Address PO BOX 681202	ESS		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City SCHAUMBURG Purpose of Disbursement  Candidate Name	Category/ Type	FEC Identification Number  C C00575092  Transaction ID: SB23.54323  Amount of Each Disbursement this Period			
Senate	Senate Primary General Other (specify) ▼				
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).		<u> </u>	6000.00		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 OF 15		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one)       21b     22       28a     28b       28c     29       30b		
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)				
College of American Pathologists P	Political Action Comm	ittee		
Full Name (Last, First, Middle Initial)		Data of Diskuraamant		
A. LOU CORREA FOR CONGRESS  Mailing Address 420 N TWIN OAKS VALLEY RD #2	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Walling Address 425 N TWIN STITE VILLET TO 1/2		00 10 20,0		
,	State Zip Code	FEC Identification Number		
	CA 92079			
Purpose of Disbursement	l r	C C00578302		
		Transaction ID : SB23.54325		
Candidate Name		Category/ Amount of Each Disbursement this Perio		
		Type		
	nent For: 2016	1000.00		
	Primary <b>x</b> General Other (specify) ▼	П., .,		
State: CA District: 46	(-II )// V	Memo Item		
Full Name (Last, First, Middle Initial)				
B. MOKAN VICTORY FUND		Date of Disbursement		
Mailing Address P.O. BOX 33126		09 16 2016		
,	State Zip Code	FEC Identification Number		
KANSAS CITY Purpose of Disbursement	MO 64114	C 000035443		
		C C00625442		
Candidate Name	Category/ Type  Transaction ID: SB23.54327  Amount of Each Disbursement this Perio			
Office Sought: House Disbursem	nent For: 2016	1000.00		
	Primary General	<del></del>		
State: President  District:	Other (specify) OTHER	Memo Item		
Full Name (Last, First, Middle Initial)		Data of Dishumanana		
C. RICHARD BURR COMMITTEE	Date of Disbursement			
Mailing Address POST OFFICE BOX 5928	09 16 2016			
City	State Zip Code	FEC Identification Number		
WINSTON-SALEM	NC 27113	Teo identification Number		
Purpose of Disbursement		C C00385526		
Candidate Name		Transaction ID : SB23.54330 Category/ Amount of Each Disbursement this Perio		
		Type		
	nent For: 2016	1000.00		
	Primary General			
	Other (specify) ▼	Memo Item		
State: NC District: 00				
SUBTOTAL of Disbursements This Page (optional)		3000.00		
JOBIOTAL OF DISDUISEMENTS THIS Page (optional)		············		
TOTAL This Period (last page this line number only).				

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 15 OF 15 (check only one)	
			21b 28a	22 <b>X</b> 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)  College of American Pathologists P				
Full Name (Last, First, Middle Initial)  A. TOM RICE FOR CONGRESS				Date of Disbursement
Mailing Address PO BOX 70098				09 16 2016
MYRTLE BEACH	State SC	Zip Code 29572		FEC Identification Number
Purpose of Disbursement  Candidate Name			Category/	C C00506048  Transaction ID : SB23.54331  Amount of Each Disbursement this Period
Senate	nent For: 20 Primary Other (speci	<b>x</b> General	Type	2500.00 Memo Item
Full Name (Last, First, Middle Initial)  B. TONY CARDENAS FOR CONGRE	ESS			Date of Disbursement  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
Mailing Address 249 E. OCEAN BLVD. SUITE 685	Stata	Zin Code		υ <del>σ</del> 10 2010
,	State CA	Zip Code 90802		FEC Identification Number  C C00498873  Transaction ID : SR23 54332
Candidate Name			Category/ Type	Transaction ID: SB23.54332  Amount of Each Disbursement this Period
Senate	nent For: 20 Primary Other (speci	<b>✗</b> General		2500.00 Memo Item
Full Name (Last, First, Middle Initial)  C. UPTON FOR ALL OF US				Date of Disbursement
Mailing Address P.O. BOX 490				09 16 2016
ST JOSEPH	State MI	Zip Code 49085		FEC Identification Number
Purpose of Disbursement  Candidate Name  Category/ Type			C C00200584  Transaction ID : SB23.54334  Amount of Each Disbursement this Period	
Senate President	nent For: 20 Primary Other (speci	<b>✗</b> General		2500.00 Memo Item
State: MI District: 06				
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).				7500.00 16500.00